

FORM TO BE USED BY A PRISONER IN FILING A CIVIL RIGHTS COMPLAINT

IN THE UNITED STATES DISTRICT COURT  
FOR THE MIDDLE DISTRICT OF PENNSYLVANIA

(1) Michael Rivera EW2442 :

(Name of Plaintiff) (Inmate Number)

1000 Follies Rd.; Dallas, PA 18612 :

(Address)

(2) N/A :

(Name of Plaintiff) (Inmate Number)

15-1659 :

(Case Number)

(Address) :

(Each named party must be numbered,  
and all names must be printed or typed)

vs.

CIVIL COMPLAINT

(1) C.O.I. J. O'Haire :

(2) C.O. II. Sgt. Shamoski :

(3) C.O. II. Sgt. Bienkowski :  
(Names of Defendants)

FILED  
SCRANTON

AUG 27 2015

PER

JMB  
DEPUTY CLERK

(Each named party must be numbered,  
and all names must be printed or typed)

TO BE FILED UNDER:  42 U.S.C. § 1983 - STATE OFFICIALS

28 U.S.C. § 1331 - FEDERAL OFFICIALS

I. PREVIOUS LAWSUITS

- A. If you have filed any other lawsuits in federal court while a prisoner, please list the caption and case number including year, as well as the name of the judicial officer to whom it was assigned:

None

## II. EXHAUSTION OF ADMINISTRATIVE REMEDIES

In order to proceed in federal court, you must fully exhaust any available administrative remedies as to each ground on which you request action.

- A. Is there a prisoner grievance procedure available at your present institution?  Yes \_\_\_\_\_ No \_\_\_\_\_
- B. Have you fully exhausted your available administrative remedies regarding each of your present claims?  Yes \_\_\_\_\_ No \_\_\_\_\_
- C. If your answer to "B" is Yes:
1. What steps did you take? Filed grievance number 549447 on 1/28/15, and the subsequent appeals on 5/2/15 and 5/18/15, respectively.
  2. What was the result? Denied on every level.
- D. If your answer to "B" is No, explain why not: N/A

## III. DEFENDANTS

(1) Name of first defendant: Corrections Officer Joe O'Haire

Employed as C.O.I. at State Correctional Institution at Dallas.

Mailing address: 1000 Follies Rd.; Dallas, PA 18612

(2) Name of second defendant: Corrections Sergeant Shamoski

Employed as C.O.II. at State Correctional Institution at Dallas.

Mailing address: 1000 Follies Rd.; Dallas, PA 18612

(3) Name of third defendant: Corrections Sergeant Bienkowski

Employed as C.O.II. at State Correctional Institution at Dallas.

Mailing address: 1000 Follies Rd.; Dallas, PA 18612

(List any additional defendants, their employment, and addresses on extra sheets if necessary)

## IV. STATEMENT OF CLAIM

(State here as briefly as possible the facts of your case. Describe how each defendant is involved, including dates and places. Do not give any legal arguments or cite any cases or statutes. Attach no more than three extra sheets if necessary.)

1. Please see the attached Complaint, which sets forth the basis of these claims with more specificity than the spacing of this form allows for.

2. Same as 1.

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3. Same as 1.

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#### V. RELIEF

(State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.)

1. Please see the attached Complaint, which sets forth the prayer for relief with more specificity than the spacing of this form allows for.

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2. Same as 1.

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3. Same as 1.

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I declare under penalty of perjury that the foregoing is true and correct.

Signed this 24th day of August, 2015.

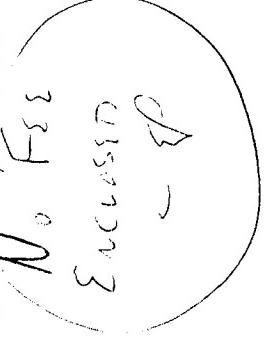
Michael Rivera  
(Signature of Plaintiff)

Michael Rivera

D.O.C. # EVN2442

1000 Follies Rd.

Dallas, PA 18612



Ms. M.E. Elkins, Clerk of Court

U.S. District Court for the Middle District of PA

235 North Washington Ave.

P.O. Box 1148

Scranton, PA 18501 - 1148